

# **OFFICE OF THE INSPECTOR GENERAL**

**DMHMRSAS**

## **SNAPSHOT INSPECTION**

**Piedmont Geriatric Hospital**

**ANITA S. EVERETT, MD**

**INSPECTOR GENERAL**

**OIG REPORT # 47-01**

## **EXECUTIVE SUMMARY**

A Snapshot Inspection was conducted at Piedmont Geriatric Hospital in Burkeville, Virginia on July 16, 2001. The purpose of a snapshot inspection is to conduct a brief unannounced review of a facility with a primary focus on three quality of care areas. During this type of inspection, the team determines (based on observations, interviews and the review of supporting documentation) the following: the general conditions of the facility, including cleanliness and comfort; whether there are adequate numbers of staff present and how the patients are engaged, including the availability of therapeutic activities designed to assist in their recovery.

Piedmont Geriatric Hospital is the only facility operated by the Commonwealth of Virginia that exclusively treats the geriatric population. The census of the facility on the date of the review was 129 with one patient on special hospitalization status.

Overall, the facility was noted to be clean and comfortable. The facility continues to work on making the environment appear less institutional.

The administration placed great emphasis on addressing both the medical and active treatment needs for this specialized and complicated population. This was demonstrated through observations of daily activities, staff and patient interactions and record review of treatment plans.

Staffing patterns were noted to be adequate and consistent with departmental expectations. Through interviews and observation, it was noted that this staff were dedicated to the well-being and treatment of this challenging population.

**Facility:** Piedmont Geriatric Hospital

Burkeville, VA

**Date:** July 16, 2001

**Type of Inspection:** Unannounced Snapshot Inspection

**Reviewers:** Cathy Hill, M.Ed

Laura Stewart, LCSW

Heather Glissman, BA

**Purpose of the Inspection:** To conduct a brief inspection of the general environmental conditions, staffing patterns and therapeutic activity of the patients.

**Sources of Information:** Interviews were conducted with both administrative and clinical staff. Patients were also interviewed. Documentation reviews, included but was not limited to: patient(s) medical records, staff schedule sheets, program descriptions and activity/program schedules. Activities and staff/patient interactions were observed during a tour of the facility.

<b>GENERAL ENVIRONMENTAL ISSUES</b>
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**Finding 1.1: The facility was clean, comfortable and well maintained.**

Background: A tour of the facility was conducted. Throughout the facility, attempts to create a home-like atmosphere were evident. Patient rooms had personalized items, such as quilts, family pictures and mementos. Bathrooms and common areas were clean. The

facility had several comfortable dining halls that hosted a variety of patients and addressed specific diets through a cook/chill program. The day rooms were equipped with a variety of musical instruments, crafts, games and entertainment for the patients to use at their leisure.

**Recommendation: None**

<b>STAFFING ISSUES</b>
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**Finding 2.1: Staffing patterns for nursing services were adequate.**

Background: There were adequate numbers of staff to meet the needs of the patients present. Staff present on the two units toured during the day shift were as follows:

1 West had a census of 32 patients with 5 Direct Service Assistants, 2 LPN's, 2 RN's, and 1 Unit Coordinator.

2 West had a census of 27 patients with 6 Human Service Care workers, 2 LPN's, and 2 RN's.

**Recommendation: Continue to provide adequate staff such that meet the needs of the individuals served by this facility.**

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**Finding 2.2: Direct care staff were knowledgeable regarding issues of abuse and neglect**

Background: Seven direct care staff were surveyed regarding the mission of the facility and its attitude toward abuse and neglect. All staff were well versed on abuse and neglect issues and are sensitive that this population can be at a higher risk of neglect. Each staff member recognized this danger and the importance of preventing neglectful actions toward patients.

**Recommendation: Continue to provide training to foster knowledge regarding abuse and neglect issues as they relate to this vulnerable population.**

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**Finding 2.3: Mandatory overtime was identified as uncommon**

Ten direct care staff were interviewed regarding overtime issues, all staff expressed that mandatory overtime was rare and only enforced to protect the safety of the patients. Staff expressed that overtime was generally not needed for a full shift, rather only to provide overlap based on patient behavior. Among staff interviewed it was sited that the average overtime amount was between 2-4 hours when a shift needed covering.

**Recommendation: None**

<b>ACTIVITY OF PATIENTS</b>
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**Finding 3.1: Psychosocial Rehabilitation (PSR) programs continue to identify and address the needs of these patients.**

Background: PGH continues to revise the role of the PSR program in the lives of their patients. In the past the facility has incorporated the methods of Dr. Lieberman and his Therapeutic Rehabilitation Program to encourage useful treatment for patients to be transferred in the community. Within the past year Piedmont has contracted with Boston Consultant Jim Waldendorf to help establish a pilot project regarding adapting the *Readiness Assessment Program* to this population. A performance improvement team was established. AS a part of this process, 32 treatment plans were reviewed and elements were integrated into active treatment plans. At the completion of this pilot project, the Boston consultants returned to the facility to provide feedback and further development of the program.

**Recommendation: Continue to pursue innovative methods to review and adapt program development to the special needs of these patients.**

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**Finding 3.2: Staff and patients work together at PGH to create interesting activities.**

Background: Recently, the facility decided to retain the services of a new contractor for the Canteen. For now the Canteen is a room of vending machines, leaving residents wanting for better ways to shop. Currently, Staff and Patients are working together to run a gift shop. Patients run this Gift shop and all items sold are made by patients. This provides additional revenue targeted for use during patient activities. This gift shop is a useful activity for patients. It provides entertainment, practical knowledge and skill building.

**Recommendation: Continue to develop creative ways to involve patients in a variety of beneficial services such as this Gift Shop.**

